



SAPR Program SARB Data Collection Worksheet

Worksheet Instructions: The following form should be used by the SARC to record the monthly case updates provided at the Sexual Assault Review Board (SARB) meetings. The SARC should complete a separate worksheet for each sexual assault case. This worksheet should be destroyed within 5 duty days of the SARB meeting, after all the information has been entered in the DCRMS (or interim solution reporting workbook maintained by the SARC until DCRMS is placed into operation).

Incident Number (for unrestricted cases): _____
CID-assigned Case Number (for unrestricted cases): _____
RRCN Number (for restricted cases): _____
Victim Advocate's Name: _____
Initial SARB Date: _____
Most Recent SARB Date: _____

Case Status:

- | | | |
|---|---|---|
| <input type="checkbox"/> Initial (Open) | <input type="checkbox"/> Long term recovery (Closed) | <input type="checkbox"/> Case Transfer IN |
| <input type="checkbox"/> Follow-On (Open) | <input type="checkbox"/> Victim reports no longer needs services (Closed) | |
| <input type="checkbox"/> Open: Awaiting disposition, but victim terminated DOD services | <input type="checkbox"/> Case Transfer OUT | |

Date Case Closed by SARC (if applicable): ____/____/____

SAFE Status (if applicable):

Victim SAFE Kit Destruction Notification Date: _____ (Victim notification required 60 days prior)

SAFE Kit Destruction Date: _____ (Destruction date occurs 1 year after storage date)

Restricted Information Only

Immediate SARC Actions:

- ☐ Non identifying data provided to Installation Commander within 24 hours

The Remainder of this Form is for Unrestricted Information Only

Case Investigation Information:

Restricted to Unrestricted Date (if applicable): _____

SITREP Completed: ☐ Yes ☐ No
Investigation Initiated: ☐ Yes ☐ No

Criminal Investigation Information:

Lead Criminal Investigation Agency:

☐ Army CID ☐ Civilian Law Enforcement ☐ Foreign Civilian ☐ Other Investigative Agency ☐ None

Evidence processing complete: ☐ Yes ☐ No ☐ Unknown

RRCN (Restricted only) _____
CID-assigned Case Number (Unrestricted only) _____

Criminal Investigation Information (continued):Criminal Investigation Status: ☐ Investigation Initiated ☐ Investigation Pending ☐ Investigation CompletedComplaint Results: ☐ Founded ☐ Unfounded ☐ Insufficient Evidence

CID-assigned Case Number: _____ - _____ - CID _____

Victim Investigative Actions:Victim Collateral Misconduct? ☐ Yes ☐ NoCDR Disposition for Collateral Misconduct: ☐ No Action Taken ☐ Administrative ☐ Non-judicial ☐ Judicial**CID Case Information:**Alleged Offender's Command notified by CID? ☐ Yes ☐ NoInstallation/Regional Command notified by CID? ☐ Yes ☐ NoWas alleged offender using alcohol prior to the incident? ☐ Yes ☐ NoWas alleged offender using drugs prior to the incident? ☐ Yes ☐ No

DNA Evidence Submitted Date: ____/____/____

DNA Evidence Processing Completion Date: ____/____/____

CDR Referred Offender to:**Family Advocacy** ☐ Yes ☐ No

Date of CDR Referral: ____/____/____

Date of Family Advocacy Response: ____/____/____

Equal Opportunity ☐ Yes ☐ No

Date of CDR Referral: ____/____/____

Date of Equal Opportunity Response: ____/____/____

Alcohol/Drug Program ☐ Yes ☐ No

Date of CDR Referral: ____/____/____

Date of Alcohol/Drug Program Response: ____/____/____

Legal Office ☐ Yes ☐ No

Date of CDR Referral: ____/____/____

Date of Legal Office Response: ____/____/____

CDR Referred Relief Agency ☐ Yes ☐ No

Date of CDR Referral: ____/____/____

Date of Relief Agency Response: ____/____/____

CDR Special Referral ☐ Yes ☐ No

Date of CDR Referral: ____/____/____

Date of Special Referral Response: ____/____/____

RRCN (Restricted only) _____
 CID-assigned Case Number (Unrestricted only) _____

Other CDR Actions:CID Released Offender to Civilian Law Enforcement? ☐ Yes ☐ No

Date CDR Provided Final CID ROI: ____/____/____

CDR Disposition Information:**Disposition Status:**☐ Pending ☐ Completed

Date CDR Initiates Action: ____/____/____

Plea/Results:

- | | |
|--|--|
| <input type="checkbox"/> Defendant pleaded not guilty and was found guilty | <input type="checkbox"/> Case not-processed by prosecutor |
| <input type="checkbox"/> Defendant pleaded not guilty and was found not guilty | <input type="checkbox"/> Case dismissed by prosecutor |
| <input type="checkbox"/> Defendant pleaded guilty to original charge(s) | <input type="checkbox"/> Defendant pleaded not guilty; found guilty of a lesser charge |
| <input type="checkbox"/> Defendant pleaded guilty to lesser charges, plea | |

No Action Taken:

- | | |
|--|---|
| <input type="checkbox"/> Unidentified Subject | <input type="checkbox"/> Victim Recanted |
| <input type="checkbox"/> Unfounded/Unsubstantiated | <input type="checkbox"/> Victim Declined to Participate |
| <input type="checkbox"/> Insufficient Evidence | <input type="checkbox"/> Alleged Offender Died |

Conviction Results:

- | | | |
|--|---|--|
| <input type="checkbox"/> Rape | <input type="checkbox"/> Attempted Indecent Assault | <input type="checkbox"/> Indecent Act |
| <input type="checkbox"/> Forcible Sodomy | <input type="checkbox"/> Aggravated Sexual Assault | <input type="checkbox"/> Wrongful Sexual Contact |
| <input type="checkbox"/> Indecent Assault | <input type="checkbox"/> Aggravated Sexual Contact | <input type="checkbox"/> Forcible Pandering |
| <input type="checkbox"/> Attempted Rape | <input type="checkbox"/> Abusive Sexual Contact | <input type="checkbox"/> Indecent Exposure |
| <input type="checkbox"/> Attempted Forcible Sodomy | | |

Judicial Action Sanctions**Judicial Action Level:**☐ Summary Courts Martial ☐ Special Courts Martial ☐ Special Courts Martial (BCD) ☐ General Courts Martial**Court Martial:**

Level of Court Martial pursued: _____

Results: _____

- | | |
|---|---|
| <input type="checkbox"/> Confinement/Imprisonment | Number of Months Confinement/Imprisonment _____ |
| <input type="checkbox"/> Forfeiture/Fine | Forfeiture – Total Dollar Amount \$ _____ |
| <input type="checkbox"/> Reduction | Type of Reduction Ordered _____ |

Military Sentencing (continued):Discharge: ☐ Dishonorable ☐ Bad Conduct Discharge ☐ Chapter 10 ILO Courts Martial

RRCN (Restricted only) _____
 CID-assigned Case Number (Unrestricted only) _____

Non Judicial Action Sanctions:NJP Action Level: ☐ Summarized ☐ Company Grade ☐ Field Grade ☐ General Officer☐ Forfeiture/Fine

Forfeiture – Total Dollar Amount \$ _____

☐ Reduction

Type of Reduction Ordered _____

☐ Restriction☐ Restricted to Barr☐ Extra Duty**Administrative Actions:****Action One:**☐ Separation (Admin Discharge)☐ Denial of Reenlistment or Continuation☐ Mandatory Reassignment☐ Correctional Custody☐ "Forced" Resignation☐ Withholding of Privileges☐ Clearance Revocation☐ Withholding of Promotion☐ MOS Reclassification☐ Promotion Revocation☐ Delay of Promotion☐ Non-Punitive Admonition☐ Retirement at Lower Grade☐ Adverse Record Entries ("Flag Action")☐ Counseling**Action Two:**☐ Separation (Admin Discharge)☐ Denial of Reenlistment or Continuation☐ Mandatory Reassignment☐ Correctional Custody☐ "Forced" Resignation☐ Withholding of Privileges☐ Clearance Revocation☐ Withholding of Promotion☐ MOS Reclassification☐ Promotion Revocation☐ Delay of Promotion☐ Non-Punitive Admonition☐ Retirement at Lower Grade☐ Adverse Record Entries ("Flag Action")☐ Counseling**Action Three:**☐ Separation (Admin Discharge)☐ Denial of Reenlistment or Continuation☐ Mandatory Reassignment☐ Correctional Custody☐ "Forced" Resignation☐ Withholding of Privileges☐ Clearance Revocation☐ Withholding of Promotion☐ MOS Reclassification☐ Promotion Revocation☐ Delay of Promotion☐ Non-Punitive Admonition☐ Retirement at Lower Grade☐ Adverse Record Entries ("Flag Action")☐ CounselingConvening Authority Approval: ☐ Yes ☐ No

If no, was a lesser sentence approved?

☐ Yes☐ No

What was the lesser sentence _____

Was victim notified of investigative outcome?

☐ Yes☐ No

Was victim notified of administrative or judicial action?

☐ Yes☐ NoVWAP Forms Provided: ☐ DD Form 2701
(Initial Info)☐ DD Form 2702
(Court-Martial Info)☐ DD Form 2703
(Post-Trial Info)☐ DD Form 2704

(Victim/Witness Certification and Election Concerning Inmate Status)

RRCN (Restricted only) _____

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